APPLICATION DATA SHEET

Application Information

Application number:: TBA

Filing Date:: Herewith

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?:: No

Number of copies of CRF::

Title :: REGULATORY T CELLS AND THEIR USE IN

IMMUNOTHERAPY AND SUPPRESSION OF

AUTOIMMUNE RESPONSES

Attorney Docket Number:: 22253-76278

Request for Early Publication?:: No

Reguest for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:

Small Entity?:: Yes

Petition included?::

Petition Type::

Licensed U.S. Gov't Agency:: Yes

Contract or Grant No:: RO1 Al34495, R37 HL56067 and PO1 Al35225

from the National Institutes of Health

Secrecy Order in Parent Appl.?:: No

First Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Bruce

Middle Name::

Family Name:: BLAZAR

Name Suffix::

City of Residence:: Golden Valley

State or Province of Residence:: MN

Country of Residence:: US

Street of mailing address:: 4350 Sussex Road

City of mailing address:: Golden Valley

State or Province of mailing address:: MN

Country of mailing address:: US

Postal or Zip Code of mailing address:: 55416

Second Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Carl

Middle Name::

Family Name:: JUNE

Name Suffix::

City of Residence:: Merion Station

State or Province of Residence:: PA

Country of Residence:: US

Street of mailing address:: 409 Baird Road

City of mailing address:: Merion Station

State or Province of mailing address:: PA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 19066

Third Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Wayne

Middle Name:: B.

Family Name:: GODFREY

Name Suffix::

City of Residence:: Birchwood

State or Province of Residence:: MN

Country of Residence:: US

Street of mailing address:: 409 Lake Avenue

City of mailing address:: Birchwood

State or Province of mailing address:: MN

Country of mailing address:: US

Postal or Zip Code of mailing address:: 55110

Fourth Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Richard

Middle Name:: G.

Family Name:: CARROLL

Name Suffix::

City of Residence:: Lansdowne

State or Province of Residence:: PA

Country of Residence:: US

Street of mailing address:: 54 Bryn Mawr Avenue

City of mailing address:: Lansdowne

State or Province of mailing address:: PA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 19050

Fifth Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country::

Status:: Full Capacity

Given Name:: Bruce

Middle Name::

Family Name:: LEVINE

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence:: US

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address:: US

Postal or Zip Code of mailing address::

Sixth Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country::

Status:: Full Capacity

Given Name:: James

Middle Name:: L.

Family Name:: RILEY

Name Suffix::

City of Residence:: Downingtown

State or Province of Residence:: PA

Country of Residence:: US

Street of mailing address:: 435 Creekside Drive

City of mailing address:: Downingtown

State or Province of mailing address:: PA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 19355

Seventh Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Patricia

Middle Name::

Family Name:: TAYLOR

Name Suffix::

City of Residence:: St. Paul

Country of Residence:: US

State or Province of Residence::

outing of Hoolastics.

Street of mailing address:: 1049 Blair Avenue

MN

City of mailing address::

St. Paul

State or Province of mailing address::

MN

Country of mailing address::

US

Postal or Zip Code of mailing address::

55104

Correspondence Information

Correspondence Customer Number ::

27730

Name::

Evelyn H. McConathy, Esq.

Street of mailing address::

1735 Market Street

City of mailing address::

Philadelphia

State or Province of mailing address::

PA

Country of mailing address::

US

Postal or Zip Code of mailing address::

1735 Market Street

Phone number::

(215) 575-7000

Fax Number:

(215) 575-7200

E-Mail address::

Emcconathy@dilworthlaw.com

Representative Information

Representative Customer Number::	27730	
----------------------------------	-------	--

Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefit under 35 USC 119(e)	60/374,356	April 19, 2002
	AND		
	Claims the benefit under 35 USC 119(e)	60/550,481	March 5, 2004

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::